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APPLICANTS

Andrew Saxon, Santa Monica, CA; *OK PNT*Ke Zhang, Los Angeles, CA;
Daocheng Zhu, Los Angeles, CA;

** CONTINUING DATA *****

None PNT

** FOREIGN APPLICATIONS *****

None PNT

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
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Verified and Acknowledged <i>[Signature]</i>	Allowance <i>[Signature]</i>	CA	11	72	4

ADDRESS

GINGER R. DREGER ESQ.
 HELLER EHRMAN WHITE & McAULIFFE LLP
 275 MIDDLEFIELD ROAD
 MENLO PARK , CA
 94025

TITLE

Fusion molecules and treatment of IgE-mediated allergic diseases

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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